

REGISTRATION FORM



Gas Pipeline Safety Conference Decatur, IL June 8, 9, & 10, 2004

Company: _____

Address: _____

Phone: _____ Fax #: _____

Name of Attendee(s):

_____	E-Mail Address: _____
_____	E-Mail Address: _____
_____	E-Mail Address: _____
_____	E-Mail Address: _____
_____	E-Mail Address: _____
_____	E-Mail Address: _____
_____	E-Mail Address: _____
_____	E-Mail Address: _____
_____	E-Mail Address: _____
_____	E-Mail Address: _____
_____	E-Mail Address: _____

Registration Fee: **\$90.00** (per person) Payable to: **IL Pipeline Safety**)

Amt. Enclosed: _____

(Make checks payable to: **IL Pipeline Safety**)

Mail Registration Form and Fee to : Nancy Standridge, Pipeline Safety
Illinois Commerce Commission
527 E. Capitol Avenue
Springfield, IL 62701
(217)785-1416